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DECLADATION E	OD UTU P	TV 00	Attorney Do	cket Number				
DECLARATION FOR UTILITY OR DESIGN			First Name	d Inventor	James K.	James K. Bullis		
PATENT AP	COMPLETE IF KNOWN							
(37 CFF	Application Number							
Declaration Submitted OR With Initial	Declarat	tion	Filing Date		 			
	Submitte	ed after Initial urcharge	Art Unit		 			
Filing		R 1.16 (e))	Examiner N	lame	1			
I hereby declare that:								
Each inventor's residence, maili	ing address, a	nd citizenship are	as stated b	elow next to t	heir name.			
I believe the inventor(s) named			t inventor(s) of the subject	t matter wh	ich is daimed	and for	
which a patent is sought on the								
Ultrasonic imaging with spot focused waves								
the specification of which		(Title of the	nvention)					
is attached hereto								
OR			_					
was filed on (MM/DD/YY	YY)		as Uni	ted States Ap	plication Nu	mber or PCT	International	
L			_					
Application Number		and was amende	•	΄ ι			f applicable).	
I hereby state that I have review amended by any amendment sp			s of the abo	ve identified s	pecification	, including the	claims, as	
						- orp 4 so		
I acknowledge the duty to disc continuation-in-part applications								
and the national or PCT interna-	tional filing da	te of the continual	tion-in-part a	application.				
I hereby claim foreign priority								
inventor's or plant breeder's ng country other than the United S								
application for patent, inventor's	s or plant bree	eder's rights certifi						
before that of the application on	which priority			-		loe		
Prior Foreign Application Number(s)	Country	Foreign Filin (MM/DD/Y		Prior Not Cla		Certified Cop Yes	No No	
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Process (see, 2)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number: OR Correspondence address below							oondence address below			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patient issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) James K.						Family Name or Surname Bulls				
Inventor's									Date	
Signature								September 19,2003		
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor.									for this unsigned inventor	
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Inventor's Signature									Date	
Residence: City	State			Country		Citizenship				
Mailing Address	L									
City	State				ZIP Count			Count	ry	
Additional Inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.										